Vendor's Offer

"Return this Section with your Response"

Offeror must complete, sign and submit an original of this form to the City Procurement Office with the proposal response. An unsigned "Vendor's Offer", late proposal response, and/or a materially incomplete response will be considered nonresponsive and rejected. Offeror is to type or legibly write in ink all information required below.

Company Name:	STAFFING SPECIALI	STS			
Company Purchase Order Mailing Address:					
Street Address:	STAFFING SPECIALISTS				
City, State, Zip:	PHOENIX, AZ 85013				
Contact Person: PATTIE LA ROSA			Phone Number: 602-27	7-4205	
E-mail Address: _pattie@azstaffing.com		(Cell Number: 480-695-9446		
Remit To Information Company Name (as it appears on invoice): STAFFING SPECIALISTS					
Company Payment Remit To Address:					
Street Address: 4205 N 7 TH AVENUE SUITE 204					
City, State, Zip:	PHOENIX, AZ 85013	X			
Company Tax Information If a Tempe-based firm, provide Tempe Transaction Privilege (Sales) Tax No.: Payment Options Will your company accept the City's Master Card for payment? Will your company accept Payment via ACH (Automated Clearing House) for payment? Yes X No					
THIS PROPOSAL IS OFFERED BY					
REQUIRED SIGNATURE OF AUTHORIZED OFFEROR (MUST SIGN IN INK) By signing this Vendor's Offer, Offeror acknowledges acceptance of all terms and conditions contained herein and that prices offered were independently developed without consultation with any other Offeror or potential Offeror. Failure to sign and return this form with proposal response will be considered nonresponsive and rejected.					
Signature of Author	A Mosa orized Offeror	<i>U</i>	Date $\frac{10}{2}$	7/2016	
PATTIE LA ROSA			Senior Account Ma	Senior Account Manager	
Print or Type Name of Authorized Individual Form 201-B (RFP)			Title of Authorized	Individual	